

## Electronic Patent Application Fee Transmittal

| Application Number:                     | 09740679                       |          |        |                      |
|---|--------------------------------|----------|--------|----------------------|
| Filing Date:                            | 19-Dec-2000                    |          |        |                      |
| Title of Invention:                     | Accommodating intraocular lens |          |        |                      |
| First Named Inventor/Applicant Name:    | J. Stuart Cumming              |          |        |                      |
| Filer:                                  | Samuel B. Stone/Jodie Davis    |          |        |                      |
| Attorney Docket Number:                 | P02087US1                      |          |        |                      |
| Filed as Small Entity                   |                                |          |        |                      |
| <b>Utility Filing Fees</b>              |                                |          |        |                      |
| Description                             | Fee Code                       | Quantity | Amount | Sub-Total in USD(\$) |
| <b>Basic Filing:</b>                    |                                |          |        |                      |
| <b>Pages:</b>                           |                                |          |        |                      |
| <b>Claims:</b>                          |                                |          |        |                      |
| <b>Miscellaneous-Filing:</b>            |                                |          |        |                      |
| <b>Petition:</b>                        |                                |          |        |                      |
| <b>Patent-Appeals-and-Interference:</b> |                                |          |        |                      |
| Post-Allowance-and-Post-Issuance:       |                                |          |        |                      |
| <b>Extension-of-Time:</b>               |                                |          |        |                      |

| Description                       | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|-----------------------------------|----------|----------|--------|----------------------|
| <b>Miscellaneous:</b>             |          |          |        |                      |
| Request for continued examination | 2801     | 1        | 395    | 395                  |
| <b>Total in USD (\$)</b>          |          |          |        | <b>395</b>           |